Williamstown Fair Paint Horse Show

PLEASE FILL OUT ONE FORM/HORSE

								-							
Horse Name:									Horse's Sex						
Registration: Year Foaled:									S	M	3 Enti	y No.			
Owner: Address: City:										EOPHC Member?					
Address: Province: P.C.: Telepho:									City:						
Province: P.C.: Tele						Telepho	one:				APHA#:				
Exhibitor Name:								APH	АРНА#:						
Address:				City:				Prov.			P.C.	P.C.			
Am / Novice ID No.						Youth ID No.					DOE	DOB:			
Relationship to Owner (Req'd for Youth & Ama					ateur Classes):						EOPHC Member?				
Classes Entered	Youth														
	Am														
	Nov														
	Open														
	Stake														
Exhibitor Name:											APH	АРНА#:			
Address:				City:				Prov.			P.C.	P.C.			
Am / Novice ID No.				•	Youth ID No.					DOB:					
Relationship to Owner (Reg'd for Youth & Amateur Classes):										EOF	EOPHC Member?				
	Youth														
	Am														
Classes Entered	Nov														
	Open														
	Stake														
Exhibitor Name:											АРНА#:				
Address: City:								Prov.			P.C.	P.C.			
Am / Novice ID No. Youth ID No.										DOE	DOB:				
Relationship to Owner (Req'd for Youth & Amateur Classes):										EOPHC Member?					
Classes Entered	Youth														
	Am														
	Nov														
	Open														
	Stake														
The St. Lawrence	Valley Ag	ricultural S	Society wi	ll not be r	esponsible	e for any a	accident a	nd/or iniur	v that m	av occui	to any	rider.	equipme	nt or hors	se at this

The St. Lawrence Valley Agricultural Society will not be responsible for any accident and/or injury that may occur to any rider, equipment or horse at this show. Signing of this entry form waives any claim against the St. Lawrence Valley Agricultural Society. I hereby certify that every horse and rider is eligible to compete and are bound by the rules of APHA and the St. Lawrence Valley Agricultural Society. I hereby consent to the entry of this minor in this show and accept responsibility for their participation if applicable.

Owner/Agent: Date:

Class Fee			х	\$6	=	\$		APHA Membership
Stakes Class Fee			х	\$10		\$	FOR OFFICE	APHA Youth Card
Late Class Fee			х	\$4	=	\$	USE ONLY	APHA Amateur Card
APHA Fee				\$3	=	\$3		Liability
Other Fees								Coggins
Paid by:	Cash		Cheque		Total	\$		Registration Certificate